

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)USE FEC MAILING LABEL  
OR TYPE OR PRINT ▼Example: If typing, type  
over the lines

Carnahan in Congress

ADDRESS (number and street)  
▼

7370 Manchester Rd STE 20

☐Check if different  
than previously  
reported. (ACC)

St. Louis

MO

63143

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00386276

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)

MO

03

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☐

April 15 Quarterly Report (Q1)

☐

July 15 Quarterly Report (Q2)

☐

October 15 Quarterly Report (Q3)

☒

January 31 Year-End Report (YE)

☐

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the  
State of

(c) 30-Day POST-Election Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

10

01

2007

through

12

31

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Lawrence S. Giesing

Signature of Treasurer

Electronically Filed by Lawrence S. Giesing

Date

01

31

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Carnahan in Congress

Report Covering the Period:

From:

M M  
1 0D D  
0 1Y Y Y Y  
2 0 0 7

To:

M M  
1 2D D  
3 1Y Y Y Y  
2 0 0 7

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	116760.00	500975.27
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	116760.00	500975.27
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	62822.91	363842.16
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	3932.97
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	62822.91	359909.19
8. Cash on Hand at Close of Reporting Period (from Line 27).....	195779.18	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	4411.43	

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name  
Carnahan in Congress

Report Covering the Period:

From:

M M  
1 0D D  
0 1Y Y Y Y  
2 0 0 7

To:

M M  
1 2D D  
3 1Y Y Y Y  
2 0 0 7**I. RECEIPTS****COLUMN A**  
Total This Period**COLUMN B**  
Election Cycle-to-Date

## 11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than  
Political Committees

(i) Itemized (use Schedule A).....

31300.00

135150.00

(ii) Unitemized.....

210.00

3980.00

(iii) TOTAL of contributions

from individuals..... ▶

31510.00

139130.00

(b) Political Party Committees.....

0.00

150.00

(c) Other Political Committees  
(such as PACS).....

85250.00

361695.27

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS  
(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))

116760.00

500975.27

12. TRANSFERS FROM OTHER  
AUTHORIZED COMMITTEES.....

0.00

0.00

## 13. LOANS

(a) Made or Guaranteed by the  
Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING  
EXPENDITURES  
(Refunds, Rebates, etc.).....

0.00

3932.97

## 15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

54.60

1241.80

16. TOTAL RECEIPTS (add Lines  
11(e), 12, 13(c), 14, and 15)  
(Carry Total to Line 24, page 4)..... ▶

116814.60

506150.04

# DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	62822.91	363842.16
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	9111.57	58410.42
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	9111.57	58410.42
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	0.00	-350.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	71934.48	421902.58

## III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	150899.06
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	116814.60
25. SUBTOTAL (add Line 23 and Line 24).....	267713.66
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	71934.48
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	195779.18

**CONSOLIDATED REPORT OF GROSS RECEIPTS FOR AUTHORIZED COMMITTEES (11 CFR 104.19)**  
**(Millionaires' Amendment)**

<b>Name of Candidate</b> Mr. Russ Carnahan		<b>Candidate ID Number</b> <div style="border: 1px solid black; padding: 2px;">H0MO00019</div>
<b>Name of Principal Campaign Committee</b> Carnahan in Congress		<b>Committee ID Number</b> <div style="border: 1px solid black; padding: 2px;">C C00386276</div>
<b>Committee Address</b> 7370 Manchester Rd STE 20		
<b>City</b> St. Louis	<b>State</b> MO	<b>ZIP</b> 63143

Report Covering Period (check one)    ☐ through June 30, or    ☒ through December 31 of the year preceding the year of the general election

	Primary	General
1. Gross receipts of authorized committees .....	404654.77	65650.00
2. Aggregate amount of contributions from personal funds of the candidate .....	.00	.00
3. Gross receipts minus the candidate's personal contributions .....	404654.77	65650.00

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Carnahan in Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Ronald D. Abramson

Mailing Address 1700 K Street, NW, Ste. 300

City

Washington

State

DC

Zip Code

20006

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Buchanan Ingersoll & Roon-  
ey PC

Occupation

Attorney/Partner

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	2	/	2	0	0	7

Transaction ID: SA154168-015

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

Agest Corp.

Mailing Address 1441 Hampton Ave

City

St. Louis

State

MO

Zip Code

63139

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	7

Transaction ID: SA107497-173

Amount of Each Receipt this Period

2300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

Mr. Gary E. Slay

Mailing Address 532 Twin Fawns

City

St. Louis

State

MO

Zip Code

63131

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Slay Transportation Compa-  
ny Inc

Occupation

Owner

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	7

Transaction ID: SA107497-173.1

Amount of Each Receipt this Period

2300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**[MEMO ITEM]****SUBTOTAL** of Receipts This Page (optional) .....

2800.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 7 / 72

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Carnahan in Congress

**A.**

Full Name (Last, First, Middle Initial)

Agest Corp.

Mailing Address 1441 Hampton Ave

City

St. Louis

State

MO

Zip Code

63139

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☐ Primary☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	7

Transaction ID: SA107497-174

Amount of Each Receipt this Period

2300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**B.**

Full Name (Last, First, Middle Initial)

Mr. Gary E. Slay

Mailing Address 532 Twin Fawns

City

St. Louis

State

MO

Zip Code

63131

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Slay Transportation Compa-  
ny Inc

Occupation

Owner

Receipt For: 2008

☐ Primary☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

4600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	7

Transaction ID: SA107497-174.1

Amount of Each Receipt this Period

2300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]****C.**

Full Name (Last, First, Middle Initial)

Agest Corp.

Mailing Address 1441 Hampton Ave

City

St. Louis

State

MO

Zip Code

63139

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	7

Transaction ID: SA107497-175

Amount of Each Receipt this Period

400.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**SUBTOTAL** of Receipts This Page (optional) .....

2700.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Carnahan in Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Glen Slay

Mailing Address 1701 Mason Knoll

City

Des Peres

State

MO

Zip Code

63131

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cahokia Marine Service

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	0	7

Transaction ID: SA107497-175.1

Amount of Each Receipt this Period

400.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**[MEMO ITEM]****B.**

Full Name (Last, First, Middle Initial)

Ms. Katherine J. Anderson

Mailing Address 6 Portland Grove Ct

City

Florissant

State

MO

Zip Code

63034

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Andy's Seasoning, Inc

Occupation

President/CEO/Owner

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	4	/	2	0	0	7

Transaction ID: SA146088-037

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

Ms. Katherine J. Anderson

Mailing Address 6 Portland Grove Ct

City

Florissant

State

MO

Zip Code

63034

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Andy's Seasoning, Inc

Occupation

President/CEO/Owner

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	6	/	2	0	0	7

Transaction ID: SA146088-038

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Carnahan in Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. E. Dean Baumgardner

Mailing Address 2866 Marledge Court

City

Madison

State

WI

Zip Code

53711

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wind Capital Group

Occupation

Senior Vice President

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 7

Transaction ID: SA556732-001

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Ms. Christine Brown

Mailing Address 1615 L St NW STE 520

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Artist

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 1 / 2 0 0 7

Transaction ID: SA513042-002

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Mr. Clarkson Carpenter, III

Mailing Address 665 S. Skinker Blvd, #10-D

City

St. Louis

State

MO

Zip Code

63105

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Carpenter Properties

Occupation

Real Estate Agent

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 3 / 2 0 0 7

Transaction ID: SA101242-008

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

2250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Carnahan in Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Michael A. DeCola

Mailing Address 8110 Westmoreland Avenue

City

Clayton

State

MO

Zip Code

63105

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mississippi Lime

Occupation  
Pres, CEO

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 6 / 2 0 0 7

Transaction ID: SA503749-011

Amount of Each Receipt this Period

1150.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Mr. Leo A. Drey

Mailing Address 515 W Point Ave

City

University City

State

MO

Zip Code

63130

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Tree Farmer

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 6 / 2 0 0 7

Transaction ID: SA102122-078

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Duffe-Nuernberger Realty Co, LLC

Mailing Address 1425 South 18th Street

City

St. Louis

State

MO

Zip Code

63104

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 3 / 2 0 0 7

Transaction ID: SA356035-017

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1900.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 72

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Carnahan in Congress

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Michele Duffe

Mailing Address 3853 Flora Pl

City

St. Louis

State

MO

Zip Code

63110

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Duffe-Nuernberger Realty  
Co. LLC

Occupation

Real Estate Agent

Receipt For: 2008

Election Cycle-to-Date ▼

☒ Primary
 ☐ General  
☐ Other (specify) ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	3		2	0	0	7

Transaction ID: SA356035-017.1

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**[MEMO ITEM]****B.**

Full Name (Last, First, Middle Initial)

Ms. Anita Estell

Mailing Address 555 12th Street, NW, Ste. 710

City

Washington

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Polsinelli Shalton Flanig-  
an Suelthaus

Occupation

Principal

Receipt For: 2008

Election Cycle-to-Date ▼

☐ Primary
 ☒ General  
☐ Other (specify) ▼

4600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	6		2	0	0	7

Transaction ID: SA513824-006

Amount of Each Receipt this Period

300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

Ms. Anita Estell

Mailing Address 555 12th Street, NW, Ste. 710

City

Washington

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Polsinelli Shalton Flanig-  
an Suelthaus

Occupation

Principal

Receipt For: 2004

Election Cycle-to-Date ▼

☒ Primary
 ☐ General  
☐ Other (specify) ▼

4600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	6		2	0	0	7

Transaction ID: SA513824-007

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

2300.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Carnahan in Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Peter Goelz

Mailing Address 316 Pennsylvania Ave, SE, Suite 5

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
O'Neill and Associates

Occupation

Senior Vice President

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA531983-006

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Mr. David S. Grossman

Mailing Address 102 Mason Ave

City

Webster Groves

State

MO

Zip Code

63119

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Grossman Iron & Steel Com-  
pany

Occupation

President

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 7 / 2 0 0 7

Transaction ID: SA169208-043

Amount of Each Receipt this Period

1250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Mrs. Jennifer Grossman

Mailing Address 102 Mason Ave

City

Webster Groves

State

MO

Zip Code

63119

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Not employed

Occupation

Homemaker

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 7 / 2 0 0 7

Transaction ID: SA169208-044

Amount of Each Receipt this Period

1250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

3500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Carnahan in Congress

**A.**

Full Name (Last, First, Middle Initial)

Ms. Denise Hasty

Mailing Address 6330 Knox Industrial Dr, Suite 20

City

St. Louis

State

MO

Zip Code

63139

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Associated General Contractors- AGC St

Occupation

Dir - Gov. Affairs/Pub. Rel.

Receipt For: 2008

Election Cycle-to-Date ▼

☒ Primary ☐ General  
☐ Other (specify) ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 7

Transaction ID: SA528335-003

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Ms. Janet Holloway

Mailing Address 23 Conway Lane

City

Clayton

State

MO

Zip Code

63124

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Monsanto

Occupation

Cheif Information Center

Receipt For: 2008

Election Cycle-to-Date ▼

☒ Primary ☐ General  
☐ Other (specify) ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 7

Transaction ID: SA515547-002

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Ms. Scarlett Lee Foster

Mailing Address 591 Stratford Ave

City

University City

State

MO

Zip Code

63130

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Monsanto

Occupation

VP - Investor Relations

Receipt For: 2008

Election Cycle-to-Date ▼

☒ Primary ☐ General  
☐ Other (specify) ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 7

Transaction ID: SA539341-002

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

2500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Carnahan in Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Steven C. Mizell

Mailing Address 12760 Post Oak Road

City

Des Peres

State

MO

Zip Code

63131

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Monsanto

Occupation

Executive Vice President

Receipt For: 2004

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA556729-001

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Ms. Inge Oliverio

Mailing Address 6263 N Scottsdale Road, Suite 140

City

Scottsdale

State

AZ

Zip Code

85250

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Oliverio Group

Occupation

Realty Executive

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 7

Transaction ID: SA556973-001

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Ms. Inge Oliverio

Mailing Address 6263 N Scottsdale Road, Suite 140

City

Scottsdale

State

AZ

Zip Code

85250

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Oliverio Group

Occupation

Realty Executive

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 7

Transaction ID: SA556973-002

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

4000.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 72

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Carnahan in Congress

**A.**

Full Name (Last, First, Middle Initial)

Roberts Communications Properties LLC

Mailing Address 1408 N. Kingshighway  
Ste 300

City	State	Zip Code
St. Louis	MO	63113

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	6	/	2	0	0	7

Transaction ID: SA501975-026

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

Mr. Steven C. Roberts

Mailing Address 1408 N Kingshighway  
Suite 300

City	State	Zip Code
St. Louis	MO	63113

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Roberts Broadcasting Co.Occupation  
Owner

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	6	/	2	0	0	7

Transaction ID: SA501975-026.1

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**[MEMO ITEM]****C.**

Full Name (Last, First, Middle Initial)

Mr. Stephen W. Skrainka

Mailing Address 7170 Washington Ave

City	State	Zip Code
University City	MO	63130

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Not employedOccupation  
Retired

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	7

Transaction ID: SA107488-044

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

500.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Carnahan in Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Jerry Steiner

Mailing Address 18111 Dawn's Trail

City

Wildwood

State

MO

Zip Code

63005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Monsanto

Occupation

Executive Vice President

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA539342-002

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Mr. Steven J. Stogel

Mailing Address 52 Kingsbury Place

City

St. Louis

State

MO

Zip Code

63112

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DFC Group

Occupation

Developer

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 7

Transaction ID: SA403132-071

Amount of Each Receipt this Period

2300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Mr. Steven J. Stogel

Mailing Address 52 Kingsbury Place

City

St. Louis

State

MO

Zip Code

63112

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DFC Group

Occupation

Developer

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 7

Transaction ID: SA403132-072

Amount of Each Receipt this Period

2300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

6600.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Carnahan in Congress

**A.**

Full Name (Last, First, Middle Initial)

Mr. Tai Tien Tran

Mailing Address 3709 Hartford

City

St. Louis

State

MO

Zip Code

63116

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mekong Restaurant

Occupation

Owner

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 0 3 / 2 0 0 7

Transaction ID: SA404215-007

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Hon. Alan D. Wheat

Mailing Address 836 W 51st Street

City

Kansas City

State

MO

Zip Code

64112

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wheat Government Relations

Occupation

Consultant

Receipt For: 2004

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: SA108623-065

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....

31300.00

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 72

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Carnahan in Congress

**A.**

Full Name (Last, First, Middle Initial)

AFL-CIO Building and Construction Trades

Mailing Address 815 16th Street, NW  
Suite 600

City State Zip Code  
Washington DC 20006

FEC ID number of contributing  
federal political committee.

**C** C00003160

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 6 / 2 0 0 7

Transaction ID: SA503760-005

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Aircraft Owners and Pilots Association

Mailing Address 601 Pennsylvania Ave, NW  
Suite 875, South Bldg.

City State Zip Code  
Washington DC 20004

FEC ID number of contributing  
federal political committee.

**C** C00131185

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA524104-006

Amount of Each Receipt this Period

5000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Aircraft Owners and Pilots Association

Mailing Address 601 Pennsylvania Ave, NW  
Suite 875, South Bldg.

City State Zip Code  
Washington DC 20004

FEC ID number of contributing  
federal political committee.

**C** C00131185

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA524104-007

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

7000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 72

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Carnahan in Congress

**A.**

Full Name (Last, First, Middle Initial)

Airports Council International-North America

Mailing Address 1775 K Street  
Suite 500

City State Zip Code  
Washington DC 20006

FEC ID number of contributing  
federal political committee.

**C** C00341800

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 1 / 2 0 0 7

Transaction ID: SA555277-001

Amount of Each Receipt this Period

2500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Ameren Federal Political Action Comm

Mailing Address 1331 Pennsylvania Avenue, NW  
Suite 550 S

City State Zip Code  
Washington DC 20004

FEC ID number of contributing  
federal political committee.

**C** C00206136

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 1 / 2 0 0 7

Transaction ID: SA204717-029

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

American Association For Justice

Mailing Address 1050 31st St., NW

City State Zip Code  
Washington DC 20007

FEC ID number of contributing  
federal political committee.

**C** C00024521

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 1 / 2 0 0 7

Transaction ID: SA513772-014

Amount of Each Receipt this Period

3000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

7500.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 72

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Carnahan in Congress

**A.**

Full Name (Last, First, Middle Initial)

American Association For Justice

Mailing Address 1050 31st St., NW

City

Washington

State

DC

Zip Code

20007

FEC ID number of contributing  
federal political committee.**C** C00024521

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	6		2	0	0	7

Transaction ID: SA513772-015

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

American Crystal Sugar Company PAC

Mailing Address 101 North Third St.

City

Moorhead

State

MN

Zip Code

56560

FEC ID number of contributing  
federal political committee.**C** C00110338

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	7		2	0	0	7

Transaction ID: SA513777-033

Amount of Each Receipt this Period

3000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

American Federation of Government Empl. PAC

Mailing Address 80 F Street NW

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.**C** C00009936

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	6		2	0	0	7

Transaction ID: SA314442-029

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**SUBTOTAL** of Receipts This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 72

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Carnahan in Congress

**A.**

Full Name (Last, First, Middle Initial)

American Hospital Association PAC

Mailing Address 325 Seventh St NW STE 700

City

Washington

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.

**C** C00106146

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 6 / 2 0 0 7

Transaction ID: SA500091-014

Amount of Each Receipt this Period

2500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

American Medical Association PAC

Mailing Address 1101 Vermont Ave NW  
12th Floor

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00000422

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 3 / 2 0 0 7

Transaction ID: SA530505-060

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

American Nurses Association PAC

Mailing Address 8515 Georgia Ave  
Suite 400

City

Silver Spring

State

MD

Zip Code

20910

FEC ID number of contributing  
federal political committee.

**C** C00017525

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 1 / 2 0 0 7

Transaction ID: SA513085-033

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 72

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Carnahan in Congress

**A.**

Full Name (Last, First, Middle Initial)

Archer Daniels Midland PAC

Mailing Address PO Box 1470

City

Decatur

State

IL

Zip Code

62525

FEC ID number of contributing  
federal political committee.

**C** C00093963

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 1 / 2 0 0 7

Transaction ID: SA301024-002

Amount of Each Receipt this Period

3000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

AT&T Inc. Federal PAC

Mailing Address 175 E. Houston, Rm 7-A-50

City

San Antonio

State

TX

Zip Code

78205

FEC ID number of contributing  
federal political committee.

**C** C00109017

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 6 / 2 0 0 7

Transaction ID: SA506793-042

Amount of Each Receipt this Period

1500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

B & D PAC

Mailing Address 300 N. Meridian Street  
Suite 2700

City

Indianapolis

State

IN

Zip Code

46204

FEC ID number of contributing  
federal political committee.

**C** C00386904

Name of Employer

Occupation

Receipt For: 2004

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 7

Transaction ID: SA552842-002

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

5500.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 72

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Carnahan in Congress

**A.**Full Name (Last, First, Middle Initial)  
Biotechnology Industry Org. PAC (BIOPAC)Mailing Address 1625 Eye St NW  
Suite 1100City State Zip Code  
Washington DC 20006FEC ID number of contributing  
federal political committee. **C** C00355677

Name of Employer

Occupation

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 1 / 2 0 0 7

Transaction ID: SA321463-004

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**B.**Full Name (Last, First, Middle Initial)  
BUILD PAC

Mailing Address 1201 15th St NW

City State Zip Code  
Washington DC 20005FEC ID number of contributing  
federal political committee. **C** C00000901

Name of Employer

Occupation

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 6 / 2 0 0 7

Transaction ID: SA504529-009

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**C.**Full Name (Last, First, Middle Initial)  
Burlington Northern Santa Fe Corp RAILPAC

Mailing Address 700 13th St NW STE 220

City State Zip Code  
Washington DC 20005FEC ID number of contributing  
federal political committee. **C** C00235739

Name of Employer

Occupation

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 7

Transaction ID: SA522776-006

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

3500.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 72

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Carnahan in Congress

**A.**

Full Name (Last, First, Middle Initial)

Burlington Northern Santa Fe Corp RAILPAC

Mailing Address 700 13th St NW STE 220

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00235739

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 7

Transaction ID: SA522776-007

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Carpenters Legislative Improvement COMM PAC

Mailing Address 101 Constitution Ave. NW

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

**C** C00001016

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 6 / 2 0 0 7

Transaction ID: SA513405-023

Amount of Each Receipt this Period

2500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Clear Channel Communications Inc. PAC

Mailing Address 200 E. Basse Road

City

San Antonio

State

TX

Zip Code

78209

FEC ID number of contributing  
federal political committee.

**C** C00279216

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: SA536108-003

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

4000.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 72

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Carnahan in Congress

**A.**

Full Name (Last, First, Middle Initial)

Comcast Corporation PAC

Mailing Address 1500 Market St 35th FL

City

Philadelphia

State

PA

Zip Code

19102

FEC ID number of contributing  
federal political committee.

**C** C00248716

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 7

Transaction ID: SA500843-031

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Electrical Construction PAC

Mailing Address 3 Bethesda Metro Center

City

Bethesda

State

MD

Zip Code

20814

FEC ID number of contributing  
federal political committee.

**C** C00113811

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 3 / 2 0 0 7

Transaction ID: SA310252-012

Amount of Each Receipt this Period

2500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Express Scripts Inc PAC

Mailing Address 13900 Riverport Dr

City

Maryland Heights

State

MO

Zip Code

63043

FEC ID number of contributing  
federal political committee.

**C** C00365072

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 6 / 2 0 0 7

Transaction ID: SA328239-015

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

5500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 72

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Carnahan in Congress

**A.**

Full Name (Last, First, Middle Initial)

Fannie Mae PAC

Mailing Address 3900 Wisconsin Ave, NW

City

Washington

State

DC

Zip Code

20016

FEC ID number of contributing  
federal political committee.

**C** C00393520

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 6 / 2 0 0 7

Transaction ID: SA537629-002

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Holcim US Inc PAC

Mailing Address 2942 Hwy 61

City

Bloomsdale

State

MO

Zip Code

63627

FEC ID number of contributing  
federal political committee.

**C** C00213348

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA501037-010

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Human Rights Campaign PAC

Mailing Address 1640 Rhode Island Ave NW

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

**C** C00235853

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 6 / 2 0 0 7

Transaction ID: SA507736-009

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

4000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 72

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Carnahan in Congress

**A.**

Full Name (Last, First, Middle Initial)  
Independent Community Bankers PAC

Mailing Address 1615 L Street NW, Ste 900

City State Zip Code  
Washington DC 20036

FEC ID number of contributing  
federal political committee. **C** C00032698

Name of Employer Occupation

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 1 / 2 0 0 7

Transaction ID: SA511069-007

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Int'l Brotherhood of Electrical Workers COPE

Mailing Address 900 Seventh St, NW

City State Zip Code  
Washington DC 20001

FEC ID number of contributing  
federal political committee. **C** C00027342

Name of Employer Occupation

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
8000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 7

Transaction ID: SA300100-035

Amount of Each Receipt this Period

3000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Kansas City Southern Indus Employees PAC

Mailing Address 427 W 12th St

City State Zip Code  
Kansas City MO 64105

FEC ID number of contributing  
federal political committee. **C** C00139451

Name of Employer Occupation

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 6 / 2 0 0 7

Transaction ID: SA242844-014

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

5000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 72

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Carnahan in Congress

**A.**

Full Name (Last, First, Middle Initial)

Monsanto Citizenship Fund

Mailing Address 800 N. Lindbergh Blvd.

City

St. Louis

State

MO

Zip Code

63141

FEC ID number of contributing  
federal political committee.

**C** C00042069

Name of Employer

Occupation

Receipt For: 2004

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 7

Transaction ID: SA536355-008

Amount of Each Receipt this Period

4000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Monsanto Citizenship Fund

Mailing Address 800 N. Lindbergh Blvd.

City

St. Louis

State

MO

Zip Code

63141

FEC ID number of contributing  
federal political committee.

**C** C00042069

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 7

Transaction ID: SA536355-009

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

NAPUS PAC for Postmasters

Mailing Address 8 Herbert St

City

Alexandria

State

VA

Zip Code

22305

FEC ID number of contributing  
federal political committee.

**C** C00100404

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 7 / 2 0 0 7

Transaction ID: SA205397-034

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

6000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 72

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Carnahan in Congress

**A.**

Full Name (Last, First, Middle Initial)

National Association of Broadcasters

Mailing Address 1771 N Street, NW

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

**C** C00009985

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 7

Transaction ID: SA539690-011

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

National Association of Realtors PAC

Mailing Address 430 N Michigan Ave

City

Chicago

State

IL

Zip Code

60611

FEC ID number of contributing  
federal political committee.

**C** C00030718

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 3 / 2 0 0 7

Transaction ID: SA513932-044

Amount of Each Receipt this Period

4000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

New Democrat Coalition PAC

Mailing Address 607 14th Street, NW  
Suite 800

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00409730

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA529702-001

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

6000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 72

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Carnahan in Congress

**A.**

Full Name (Last, First, Middle Initial)  
Norfolk Southern Corp Good Government Fund

Mailing Address 1500 K Street, NW  
Suite 375

City State Zip Code  
Washington DC 20005

FEC ID number of contributing  
federal political committee.

**C** C00009282

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA508150-009

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
O'Neill and Associates PAC

Mailing Address 1 Beacon Street, Suite 1600

City State Zip Code  
Boston MA 02108

FEC ID number of contributing  
federal political committee.

**C** C00362210

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA531983-007

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Owner-Operator Indep Drivers Assoc PAC

Mailing Address 1101 30th St NW STE 300

City State Zip Code  
Washington DC 20007

FEC ID number of contributing  
federal political committee.

**C** C00236778

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: SA329653-008

Amount of Each Receipt this Period

2500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

5000.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 72

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Carnahan in Congress

**A.**

Full Name (Last, First, Middle Initial)

Parsons Corporation PAC

Mailing Address 1133 15th Street, NW  
STE 800City State Zip Code  
Washington DC 20005FEC ID number of contributing  
federal political committee.**C** C00103549

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 6 / 2 0 0 7

Transaction ID: SA534107-004

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**B.**

Full Name (Last, First, Middle Initial)

Seafarers Political Activity Donation

Mailing Address 5201 Auth Way

City State Zip Code  
Camp Springs MD 20746FEC ID number of contributing  
federal political committee.**C** C00004325

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 3 / 2 0 0 7

Transaction ID: SA149804-018

Amount of Each Receipt this Period

4250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**C.**

Full Name (Last, First, Middle Initial)

Sheet Metal Workers Int'l Assoc Pol Act League

Mailing Address 1750 New York Ave NW

City State Zip Code  
Washington DC 20006FEC ID number of contributing  
federal political committee.**C** C00007542

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: SA513911-008

Amount of Each Receipt this Period

5000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**SUBTOTAL** of Receipts This Page (optional) .....

11250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 72

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Carnahan in Congress

**A.**

Full Name (Last, First, Middle Initial)

Turkish Coalition USA Political Action Com.

Mailing Address 1025 Connecticut Avenue, NW  
Suite 1000

City State Zip Code  
Washington DC 20036

FEC ID number of contributing  
federal political committee.

**C** C00432526

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 1 / 2 0 0 7

Transaction ID: SA553615-001

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

United Association Political Education Commit

Mailing Address 901 Massachusetts Ave NW

City State Zip Code  
Washington DC 20001

FEC ID number of contributing  
federal political committee.

**C** C00012476

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 7 / 2 0 0 7

Transaction ID: SA210337-021

Amount of Each Receipt this Period

5000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

6000.00

**TOTAL** This Period (last page this line number only) .....

85250.00



# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 72

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Carnahan in Congress

**A.**

Full Name (Last, First, Middle Initial)

The Business Bank Of St. Louis

Mailing Address 8000 Maryland, STE 100

City

Clayton

State

MO

Zip Code

63105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1206.56

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Transaction ID: SA512677-067

Amount of Each Receipt this Period

19.36

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

The Business Bank Of St. Louis

Mailing Address 8000 Maryland, STE 100

City

Clayton

State

MO

Zip Code

63105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1224.21

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: SA512677-069

Amount of Each Receipt this Period

17.65

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

The Business Bank Of St. Louis

Mailing Address 8000 Maryland, STE 100

City

Clayton

State

MO

Zip Code

63105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1241.80

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA512677-070

Amount of Each Receipt this Period

17.59

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

54.60

**TOTAL** This Period (last page this line number only) .....

54.60

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 34 / 72

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Carnahan in Congress

<b>A.</b> Full Name (Last, First, Middle Initial) A+ Conferencing	<b>Transaction ID:</b> SB511573-037 <b>Date of Disbursement</b>
Mailing Address PO Box 631089	<div> <div>10</div> <div>05</div> <div>2007</div> </div>
City Houston State TX Zip Code 77263	Amount of Each Disbursement this Period
Purpose of Disbursement Conference calls Candidate Name A+ Conferencing Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>27.71</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) AllMail USA	<b>Transaction ID:</b> SB503114-019 <b>Date of Disbursement</b>
Mailing Address 8503 Mid County Industrial Dr	<div> <div>12</div> <div>18</div> <div>2007</div> </div>
City Breckenridge Hills State MO Zip Code 63114	Amount of Each Disbursement this Period
Purpose of Disbursement Mailing Services Candidate Name AllMail USA Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>1219.77</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) AmerenUE	<b>Transaction ID:</b> SB518880-035 <b>Date of Disbursement</b>
Mailing Address PO Box 66301	<div> <div>10</div> <div>05</div> <div>2007</div> </div>
City St. Louis State MO Zip Code 63166	Amount of Each Disbursement this Period
Purpose of Disbursement Utilities Candidate Name AmerenUE Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>86.65</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

1334.13

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 35 / 72

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Carnahan in Congress

<b>A.</b> Full Name (Last, First, Middle Initial) AmerenUE Mailing Address PO Box 66301	<b>Transaction ID:</b> SB518880-036 <b>Date of Disbursement</b> <div> <div>11</div> <div>13</div> <div>2007</div> </div>
City St. Louis State MO Zip Code 63166 Purpose of Disbursement Utilities Candidate Name AmerenUE Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General State: District: <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>40.86</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) AmerenUE Mailing Address PO Box 66301 City St. Louis State MO Zip Code 63166 Purpose of Disbursement Utilities Candidate Name AmerenUE Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General State: District: <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB518880-037 <b>Date of Disbursement</b> <div> <div>11</div> <div>28</div> <div>2007</div> </div> <b>Amount of Each Disbursement this Period</b> <div>31.85</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) AT&T (formerly SBC) Mailing Address One SBC Center City St. Louis State MO Zip Code 63103 Purpose of Disbursement Telephone Service Candidate Name AT&T (formerly SBC) Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General State: District: <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB503124-052 <b>Date of Disbursement</b> <div> <div>10</div> <div>01</div> <div>2007</div> </div> <b>Amount of Each Disbursement this Period</b> <div>439.94</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....**512.65****TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 36 / 72

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Carnahan in Congress

<b>A.</b> Full Name (Last, First, Middle Initial) AT&T (formerly SBC) Mailing Address One SBC Center	<b>Transaction ID:</b> SB503124-054 <b>Date of Disbursement</b> <div> <div>11</div> <div>01</div> <div>2007</div> </div>
City St. Louis State MO Zip Code 63103 Purpose of Disbursement Telephone Service Candidate Name AT&T (formerly SBC) Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>432.46</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) AT&T (formerly SBC) Mailing Address One SBC Center City St. Louis State MO Zip Code 63103 Purpose of Disbursement Telephone Service Candidate Name AT&T (formerly SBC) Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB503124-055 <b>Date of Disbursement</b> <div> <div>12</div> <div>03</div> <div>2007</div> </div> <b>Amount of Each Disbursement this Period</b> <div>432.31</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) Rep. John Russell Carnahan Mailing Address 3150 Allen Ave City St. Louis State MO Zip Code 63104 Purpose of Disbursement Interest Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB121783-028 <b>Date of Disbursement</b> <div> <div>10</div> <div>12</div> <div>2007</div> </div> <b>Amount of Each Disbursement this Period</b> <div>3000.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

**3864.77**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 37 / 72

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Carnahan in Congress**A.**Full Name (Last, First, Middle Initial)  
Rep. John Russell Carnahan

Mailing Address 3150 Allen Ave

City State Zip Code  
St. Louis MO 63104Purpose of Disbursement  
Interest

Candidate Name

009  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB121783-030  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	9		2	0	0	7

Amount of Each Disbursement this Period

1592.34

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**B.**Full Name (Last, First, Middle Initial)  
Cingular Wireless, Now AT&T Mobility

Mailing Address PO Box 650553

City State Zip Code  
Dallas TX 75265Purpose of Disbursement  
Telephone ServiceCandidate Name  
Cingular Wireless, Now AT&T Mobility001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB404815-049  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	5		2	0	0	7

Amount of Each Disbursement this Period

209.31

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**C.**Full Name (Last, First, Middle Initial)  
Cingular Wireless, Now AT&T Mobility

Mailing Address PO Box 650553

City State Zip Code  
Dallas TX 75265Purpose of Disbursement  
Telephone ServiceCandidate Name  
Cingular Wireless, Now AT&T Mobility001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB404815-050  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	0	7

Amount of Each Disbursement this Period

204.78

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

2006.43

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 38 / 72

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Carnahan in Congress

**A.** Full Name (Last, First, Middle Initial)  
Cingular Wireless, Now AT&T Mobility

Mailing Address PO Box 650553

City Dallas State TX Zip Code 75265

Purpose of Disbursement  
Telephone Service

Candidate Name  
Cingular Wireless, Now AT&T Mobility

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB404815-051

Date of Disbursement

/   /

Amount of Each Disbursement this Period

199.34

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.** Full Name (Last, First, Middle Initial)  
CS Data Managers LLC

Mailing Address 406 N Main Street  
Suite B

City Rolla State MO Zip Code 65401

Purpose of Disbursement  
Data Management Services

Candidate Name  
CS Data Managers LLC

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB500671-057

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1859.83

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.** Full Name (Last, First, Middle Initial)  
CS Data Managers LLC

Mailing Address 406 N Main Street  
Suite B

City Rolla State MO Zip Code 65401

Purpose of Disbursement  
Data Management Services

Candidate Name  
CS Data Managers LLC

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB500671-058

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1507.86

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

3567.03

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 39 / 72

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Carnahan in Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) CS Data Managers LLC</p> <hr/> <p>Mailing Address 406 N Main Street Suite B</p> <hr/> <p>City Rolla State MO Zip Code 65401</p> <hr/> <p>Purpose of Disbursement Data Management Services</p> <hr/> <p>Candidate Name CS Data Managers LLC</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB500671-059</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <hr/> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1512.39"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Degenhardt Heating and Cooling</p> <hr/> <p>Mailing Address 7624 S Broadway</p> <hr/> <p>City St. Louis State MO Zip Code 63111</p> <hr/> <p>Purpose of Disbursement Maintenance</p> <hr/> <p>Candidate Name Degenhardt Heating and Cooling</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB512939-002</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <hr/> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="260.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Division of Employment Security</p> <hr/> <p>Mailing Address PO Box 888</p> <hr/> <p>City Jefferson City State MO Zip Code 65102</p> <hr/> <p>Purpose of Disbursement Payroll taxes</p> <hr/> <p>Candidate Name Division of Employment Security</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB503141-045</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <hr/> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="6.26"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**1778.65**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 40 / 72

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Carnahan in Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Fleet Management Solutions, Inc. Mailing Address 3426 Empresa Drive, Ste. 100	<b>Transaction ID:</b> SB553524-005 <b>Date of Disbursement</b> <div> <div>10</div> <div>01</div> <div>2007</div> </div>
City San Luis Obispo State CA Zip Code 93401 Purpose of Disbursement Automobile Expense Candidate Name Fleet Management Solutions, Inc. Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>39.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) Fleet Management Solutions, Inc. Mailing Address 3426 Empresa Drive, Ste. 100 City San Luis Obispo State CA Zip Code 93401 Purpose of Disbursement Automobile Expense Candidate Name Fleet Management Solutions, Inc. Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB553524-006 <b>Date of Disbursement</b> <div> <div>10</div> <div>05</div> <div>2007</div> </div> <b>Amount of Each Disbursement this Period</b> <div>39.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) Fleet Management Solutions, Inc. Mailing Address 3426 Empresa Drive, Ste. 100 City San Luis Obispo State CA Zip Code 93401 Purpose of Disbursement Automobile Expense Candidate Name Fleet Management Solutions, Inc. Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB553524-007 <b>Date of Disbursement</b> <div> <div>11</div> <div>13</div> <div>2007</div> </div> <b>Amount of Each Disbursement this Period</b> <div>39.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<div>117.00</div>
<b>TOTAL</b> This Period (last page this line number only) .....	



# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 41 / 72

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Carnahan in Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Ford Credit Mailing Address PO Box 790093	<b>Transaction ID:</b> SB553839-002 <b>Date of Disbursement</b> <div> <div>10</div> <div>01</div> <div>2007</div> </div>
City St. Louis State MO Zip Code 63179 Purpose of Disbursement Automobile Candidate Name Ford Credit Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>634.28</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) Ford Credit Mailing Address PO Box 790093 City St. Louis State MO Zip Code 63179 Purpose of Disbursement Automobile Candidate Name Ford Credit Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB553839-004 <b>Date of Disbursement</b> <div> <div>10</div> <div>29</div> <div>2007</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1268.56</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) Ford Credit Mailing Address PO Box 790093 City St. Louis State MO Zip Code 63179 Purpose of Disbursement Automobile Candidate Name Ford Credit Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB553839-005 <b>Date of Disbursement</b> <div> <div>11</div> <div>13</div> <div>2007</div> </div> <b>Amount of Each Disbursement this Period</b> <div>590.03</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

**2492.87**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 42 / 72

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Carnahan in Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Ford Credit Mailing Address PO Box 790093	<b>Transaction ID:</b> SB553839-006 <b>Date of Disbursement</b> <div> <div>12</div> <div>11</div> <div>2007</div> </div>
City St. Louis State MO Zip Code 63179 Purpose of Disbursement Automobile Candidate Name Ford Credit Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>590.03</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) Intuit Payroll Service Mailing Address 2632 Marine Way, MS2700 City Mountain View State CA Zip Code 94039 Purpose of Disbursement Payroll Service Fees Candidate Name Intuit Payroll Service Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB550866-020 <b>Date of Disbursement</b> <div> <div>10</div> <div>01</div> <div>2007</div> </div> <b>Amount of Each Disbursement this Period</b> <div>4.98</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) Intuit Payroll Service Mailing Address 2632 Marine Way, MS2700 City Mountain View State CA Zip Code 94039 Purpose of Disbursement Payroll Service Fees Candidate Name Intuit Payroll Service Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB550866-021 <b>Date of Disbursement</b> <div> <div>10</div> <div>15</div> <div>2007</div> </div> <b>Amount of Each Disbursement this Period</b> <div>4.98</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

599.99

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 43 / 72

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Carnahan in Congress

A.

Full Name (Last, First, Middle Initial)  
Intuit Payroll Service

Mailing Address 2632 Marine Way, MS2700

City State Zip Code  
Mountain View CA 94039

Purpose of Disbursement  
Payroll Service Fees

Candidate Name  
Intuit Payroll Service

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB550866-022  
Date of Disbursement

11 / 01 / 2007

Amount of Each Disbursement this Period

4.98

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)  
Intuit Payroll Service

Mailing Address 2632 Marine Way, MS2700

City State Zip Code  
Mountain View CA 94039

Purpose of Disbursement  
Payroll Service Fees

Candidate Name  
Intuit Payroll Service

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB550866-023  
Date of Disbursement

11 / 15 / 2007

Amount of Each Disbursement this Period

4.98

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)  
Intuit Payroll Service

Mailing Address 2632 Marine Way, MS2700

City State Zip Code  
Mountain View CA 94039

Purpose of Disbursement  
Payroll Service Fees

Candidate Name  
Intuit Payroll Service

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB550866-024  
Date of Disbursement

12 / 01 / 2007

Amount of Each Disbursement this Period

4.98

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ►

14.94

TOTAL This Period (last page this line number only) ►

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 44 / 72

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Carnahan in Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Intuit Payroll Service Mailing Address 2632 Marine Way, MS2700	<b>Transaction ID:</b> SB550866-025 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 5 / 2 0 0 7</div> </div>
City State Zip Code Mountain View CA 94039 Purpose of Disbursement Payroll Service Fees Candidate Name Intuit Payroll Service Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>4.98</div> </div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) Mandate Media Mailing Address 2014 Southeast 39th City State Zip Code Portland OR 97214 Purpose of Disbursement Mailing Services Candidate Name Mandate Media Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB538311-010 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 9 / 2 0 0 7</div> </div> <b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>86.97</div> </div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) Merchant E-Solutions Mailing Address 920 N. Argonne Ste 200 City State Zip Code Spokane WA 99212 Purpose of Disbursement Merchant account fees Candidate Name Merchant E-Solutions Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB507931-111 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 0 1 / 2 0 0 7</div> </div> <b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>54.55</div> </div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**146.50**

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 45 / 72

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Carnahan in Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Merchant E-Solutions	<b>Transaction ID:</b> SB507931-115 <b>Date of Disbursement</b>
Mailing Address 920 N. Argonne Ste 200	<div> <div><small>M</small>1</div> <div><small>M</small>1</div> <div>/</div> <div><small>D</small>0</div> <div><small>D</small>2</div> <div>/</div> <div><small>Y</small>2</div> <div><small>Y</small>0</div> <div><small>Y</small>0</div> <div><small>Y</small>7</div> </div>
City Spokane State WA Zip Code 99212	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Merchant account fees	<div>51.77</div>
Candidate Name Merchant E-Solutions	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Merchant E-Solutions	<b>Transaction ID:</b> SB507931-116 <b>Date of Disbursement</b>
Mailing Address 920 N. Argonne Ste 200	<div> <div><small>M</small>1</div> <div><small>M</small>2</div> <div>/</div> <div><small>D</small>0</div> <div><small>D</small>3</div> <div>/</div> <div><small>Y</small>2</div> <div><small>Y</small>0</div> <div><small>Y</small>0</div> <div><small>Y</small>7</div> </div>
City Spokane State WA Zip Code 99212	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Merchant account fees	<div>60.00</div>
Candidate Name Merchant E-Solutions	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Merchant E-Solutions	<b>Transaction ID:</b> SB507931-118 <b>Date of Disbursement</b>
Mailing Address 920 N. Argonne Ste 200	<div> <div><small>M</small>1</div> <div><small>M</small>0</div> <div>/</div> <div><small>D</small>0</div> <div><small>D</small>9</div> <div>/</div> <div><small>Y</small>2</div> <div><small>Y</small>0</div> <div><small>Y</small>0</div> <div><small>Y</small>7</div> </div>
City Spokane State WA Zip Code 99212	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Merchant account fees	<div>1.18</div>
Candidate Name Merchant E-Solutions	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

112.95

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 46 / 72

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Carnahan in Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Merchant E-Solutions	<b>Transaction ID:</b> SB507931-119 <b>Date of Disbursement</b>
Mailing Address 920 N. Argonne Ste 200	<div> <div>10</div> <div>16</div> <div>2007</div> </div>
City Spokane State WA Zip Code 99212	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Merchant account fees	<div>11.75</div>
Candidate Name Merchant E-Solutions	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Missouri Department of Revenue	<b>Transaction ID:</b> SB503141-044 <b>Date of Disbursement</b>
Mailing Address PO Box 999	<div> <div>10</div> <div>10</div> <div>2007</div> </div>
City Jefferson City State MO Zip Code 65108	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Payroll taxes	<div>318.00</div>
Candidate Name Missouri Department of Revenue	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Missouri Progressive Vote Coalition	<b>Transaction ID:</b> SB404650-006 <b>Date of Disbursement</b>
Mailing Address 5585 Pershing Ave., Ste. 150	<div> <div>11</div> <div>28</div> <div>2007</div> </div>
City Saint Louis State MO Zip Code 63112	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Awards Dinner Tickets	<div>750.00</div>
Candidate Name Missouri Progressive Vote Coalition	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

1079.75

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 47 / 72

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Carnahan in Congress**A.**

Full Name (Last, First, Middle Initial)

Mr. Benjamin J. Murray

Mailing Address 2147 Avalon Ridge Circle

City Fenton State MO Zip Code 63026

Purpose of Disbursement  
Salary

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB503138-110

Date of Disbursement

10 / 01 / 2007

Amount of Each Disbursement this Period

637.63

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**B.**

Full Name (Last, First, Middle Initial)

Mr. Benjamin J. Murray

Mailing Address 2147 Avalon Ridge Circle

City Fenton State MO Zip Code 63026

Purpose of Disbursement  
Salary

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB503138-111

Date of Disbursement

10 / 15 / 2007

Amount of Each Disbursement this Period

637.62

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**C.**

Full Name (Last, First, Middle Initial)

Mr. Benjamin J. Murray

Mailing Address 2147 Avalon Ridge Circle

City Fenton State MO Zip Code 63026

Purpose of Disbursement  
Salary

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB503138-112

Date of Disbursement

11 / 01 / 2007

Amount of Each Disbursement this Period

637.63

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

1912.88

TOTAL This Period (last page this line number only) ▶

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 48 / 72

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Carnahan in Congress

A.

Full Name (Last, First, Middle Initial)

Mr. Benjamin J. Murray

Mailing Address 2147 Avalon Ridge Circle

City Fenton State MO Zip Code 63026

Purpose of Disbursement  
Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB503138-113

Date of Disbursement

11 / 15 / 2007

Amount of Each Disbursement this Period

637.62

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)

Mr. Benjamin J. Murray

Mailing Address 2147 Avalon Ridge Circle

City Fenton State MO Zip Code 63026

Purpose of Disbursement  
Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB503138-114

Date of Disbursement

12 / 01 / 2007

Amount of Each Disbursement this Period

637.63

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)

Mr. Benjamin J. Murray

Mailing Address 2147 Avalon Ridge Circle

City Fenton State MO Zip Code 63026

Purpose of Disbursement  
Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB503138-115

Date of Disbursement

12 / 15 / 2007

Amount of Each Disbursement this Period

637.62

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

1912.87

TOTAL This Period (last page this line number only) .....



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 49 / 72

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Carnahan in Congress

<b>A.</b> Full Name (Last, First, Middle Initial) National City Bank	<b>Transaction ID:</b> SB503121-037 <b>Date of Disbursement</b>																				
Mailing Address 230 N. Euclid Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	8		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	8		2	0	7													
City State Zip Code St. Louis MO 63108	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Bank Fees	<table border="1"> <tr> <td colspan="10">10.00</td> </tr> </table>	10.00																			
10.00																					
Candidate Name National City Bank	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type 001																				
State: District:																					
<b>B.</b> Full Name (Last, First, Middle Initial) National City Bank	<b>Transaction ID:</b> SB503121-038 <b>Date of Disbursement</b>																				
Mailing Address 230 N. Euclid Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	5		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	5		2	0	7													
City State Zip Code St. Louis MO 63108	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Credit Card Payment	<table border="1"> <tr> <td colspan="10">90.51</td> </tr> </table>	90.51																			
90.51																					
Candidate Name National City Bank	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type 001																				
State: District:																					
<b>C.</b> Full Name (Last, First, Middle Initial) Office Depot	<b>Transaction ID:</b> SB503121-038.1 <b>Date of Disbursement</b>																				
Mailing Address 1024 S Big Bend Blvd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>7</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	5		2	0	7	
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	5		2	0	7													
City State Zip Code Richmond Heights MO 63117	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Office Supplies	<table border="1"> <tr> <td colspan="10">79.58</td> </tr> </table>	79.58																			
79.58																					
Candidate Name National City Bank	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type 001  <b>[MEMO ITEM]</b>																				
State: District:																					

SUBTOTAL of Disbursements This Page (optional) .....

100.51

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 50 / 72

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Carnahan in Congress

A.

Full Name (Last, First, Middle Initial)  
National City Bank

Mailing Address 230 N. Euclid Avenue

City State Zip Code  
St. Louis MO 63108

Purpose of Disbursement  
Credit Card Payment

Candidate Name  
National City Bank

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB503121-039  
Date of Disbursement

11 / 13 / 2007

Amount of Each Disbursement this Period

1217.56

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)  
J2 Fax Broadcast Service

Mailing Address 6922 Hollywood Blvd.

City State Zip Code  
Los Angeles CA 90028

Purpose of Disbursement  
Advertising

Candidate Name  
National City Bank

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB503121-039.1  
Date of Disbursement

11 / 13 / 2007

Amount of Each Disbursement this Period

250.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
Office Depot

Mailing Address 1024 S Big Bend Blvd

City State Zip Code  
Richmond Heights MO 63117

Purpose of Disbursement  
Office Supplies

Candidate Name  
National City Bank

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB503121-039.2  
Date of Disbursement

11 / 13 / 2007

Amount of Each Disbursement this Period

10.75

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

1217.56

TOTAL This Period (last page this line number only) .....

X	17		18		19a		19b
	20a		20b		20c		21

NAME OF COMMITTEE (In Full)  
Carnahan in Congress

Full Name (Last, First, Middle Initial)  
Postmaster

Mailing Address Benton Park Station

City	State	Zip Code
St. Louis	MO	63104

[illegible]

Candidate Name  
National City Bank

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

State:  District:

Date of Disbursement

Amount of Each Disbursement this Period

90.25

☐ Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)  
Safeway Store

Mailing Address 415 14th Street SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement	Food for event
-------------------------	----------------

Candidate Name  
National City Bank

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

Date of Disbursement

Amount of Each Disbursement this Period

129.85

☐ Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)  
Safeway Store

Mailing Address 415 14th Street SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement	Food for event
-------------------------	----------------

Candidate Name  
National City Bank

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

State:  District:

Date of Disbursement

Amount of Each Disbursement this Period

127.03

☐ Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 52 / 72

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Carnahan in Congress

<b>A.</b> Full Name (Last, First, Middle Initial) UPS Mailing Address PO Box 650580	<b>Transaction ID:</b> SB503121-039.6 <b>Date of Disbursement</b> <div> <div>11</div> <div>13</div> <div>2007</div> </div>
City Dallas State TX Zip Code 75265 Purpose of Disbursement Delivery Service Candidate Name National City Bank Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>74.26</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) National City Bank Mailing Address 230 N. Euclid Avenue City St. Louis State MO Zip Code 63108 Purpose of Disbursement Credit Card Payment Candidate Name National City Bank Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB503121-040 <b>Date of Disbursement</b> <div> <div>12</div> <div>11</div> <div>2007</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1789.66</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) American Airlines, Inc. Mailing Address PO Box 619616 Mail Drop 2400 City Dallas State TX Zip Code 75261 Purpose of Disbursement Travel Candidate Name National City Bank Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB503121-040.1 <b>Date of Disbursement</b> <div> <div>12</div> <div>11</div> <div>2007</div> </div> <b>Amount of Each Disbursement this Period</b> <div>718.80</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>

SUBTOTAL of Disbursements This Page (optional) .....

1789.66

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 53 / 72

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Carnahan in Congress

A.

Full Name (Last, First, Middle Initial)  
Charlie Palmer Steak House

Mailing Address 101 Constitution Ave NW

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Catering

Candidate Name  
National City Bank

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

007  
Category/  
Type

Transaction ID: SB503121-040.2  
Date of Disbursement

12 / 11 / 2007

Amount of Each Disbursement this Period

162.40

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
National City Bank

Mailing Address 230 N. Euclid Avenue

City St. Louis State MO Zip Code 63108

Purpose of Disbursement  
Bank Fees

Candidate Name  
National City Bank

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

001  
Category/  
Type

Transaction ID: SB503121-040.3  
Date of Disbursement

12 / 11 / 2007

Amount of Each Disbursement this Period

39.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
Office Depot

Mailing Address 1024 S Big Bend Blvd

City Richmond Heights State MO Zip Code 63117

Purpose of Disbursement  
Office Supplies

Candidate Name  
National City Bank

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

001  
Category/  
Type

Transaction ID: SB503121-040.4  
Date of Disbursement

12 / 11 / 2007

Amount of Each Disbursement this Period

75.29

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 54 / 72

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Carnahan in Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Postmaster	<b>Transaction ID:</b> SB503121-040.5 <b>Date of Disbursement</b>
Mailing Address Benton Park Station	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 1 / 2 0 0 7</div> </div>
City St. Louis State MO Zip Code 63104	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Postage Candidate Name National City Bank Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> <div></div> <div>4.90</div> </div>
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Safeway Store	<b>Transaction ID:</b> SB503121-040.6 <b>Date of Disbursement</b>
Mailing Address 415 14th Street SE	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 1 / 2 0 0 7</div> </div>
City Washington State DC Zip Code 20003	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Food for event Candidate Name National City Bank Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> <div></div> <div>73.62</div> </div>
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Southwest Airlines	<b>Transaction ID:</b> SB503121-040.7 <b>Date of Disbursement</b>
Mailing Address PO Box 36647	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 1 / 2 0 0 7</div> </div>
City Dallas State TX Zip Code 75235	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Travel Candidate Name National City Bank Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> <div></div> <div>432.80</div> </div>
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 55 / 72

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Carnahan in Congress

<b>A.</b> Full Name (Last, First, Middle Initial) US House Members Dining Mailing Address US Capitol	<b>Transaction ID:</b> SB503121-040.8 <b>Date of Disbursement</b> <div> <div>12</div> <div>11</div> <div>2007</div> </div>
City Washington State DC Zip Code 20515 Purpose of Disbursement Catering Candidate Name National City Bank Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>112.15</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) US House Of Rep. Gift Shop Mailing Address B218 Longworth House Office Bldg City Washington State DC Zip Code 20515 Purpose of Disbursement Miscellaneous Candidate Name National City Bank Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB503121-040.9 <b>Date of Disbursement</b> <div>12</div> <div>11</div> <div>2007</div> <b>Amount of Each Disbursement this Period</b> <div>30.36</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) US House Of Rep. Gift Shop Mailing Address B218 Longworth House Office Bldg City Washington State DC Zip Code 20515 Purpose of Disbursement Miscellaneous Candidate Name National City Bank Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB503121-040.10 <b>Date of Disbursement</b> <div>12</div> <div>11</div> <div>2007</div> <b>Amount of Each Disbursement this Period</b> <div>33.59</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<div>0.00</div> <div></div>
<b>TOTAL</b> This Period (last page this line number only) .....	<div></div>

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 56 / 72

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Carnahan in Congress

**A.**

Full Name (Last, First, Middle Initial)  
National Democratic Club

Mailing Address 30 Ivy St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Membership Dues

Candidate Name  
National Democratic Club

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

001  
Category/  
Type

Transaction ID: SB526236-050  
Date of Disbursement

10 / 01 / 2007

Amount of Each Disbursement this Period

20.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)  
National Democratic Club

Mailing Address 30 Ivy St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Catering

Candidate Name  
National Democratic Club

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

007  
Category/  
Type

Transaction ID: SB526236-051  
Date of Disbursement

10 / 01 / 2007

Amount of Each Disbursement this Period

55.89

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)  
National Democratic Club

Mailing Address 30 Ivy St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Membership Dues

Candidate Name  
National Democratic Club

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

001  
Category/  
Type

Transaction ID: SB526236-052  
Date of Disbursement

10 / 29 / 2007

Amount of Each Disbursement this Period

20.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

95.89

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 57 / 72

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Carnahan in Congress

<b>A.</b> Full Name (Last, First, Middle Initial) National Democratic Club Mailing Address 30 Ivy St SE	<b>Transaction ID:</b> SB526236-053 <b>Date of Disbursement</b> <div> <div>10</div> <div>29</div> <div>2007</div> </div>
City Washington State DC Zip Code 20003 Purpose of Disbursement Catering Candidate Name National Democratic Club Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>470.81</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) National Democratic Club Mailing Address 30 Ivy St SE	<b>Transaction ID:</b> SB526236-054 <b>Date of Disbursement</b> <div> <div>11</div> <div>28</div> <div>2007</div> </div>
City Washington State DC Zip Code 20003 Purpose of Disbursement Membership Dues Candidate Name National Democratic Club Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>20.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) National Democratic Club Mailing Address 30 Ivy St SE	<b>Transaction ID:</b> SB526236-055 <b>Date of Disbursement</b> <div> <div>11</div> <div>28</div> <div>2007</div> </div>
City Washington State DC Zip Code 20003 Purpose of Disbursement Catering Candidate Name National Democratic Club Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>161.09</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ►	
<b>TOTAL</b> This Period (last page this line number only) ..... ►	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 58 / 72

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Carnahan in Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Phelps County Bank Mailing Address 718 N Pine St	<b>Transaction ID:</b> SB503143-055 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	0		2	0	0	7	
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		1	0		2	0	0	7													
City Rolla State MO Zip Code 65401 Purpose of Disbursement Payroll Taxes Candidate Name Phelps County Bank Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>820.38</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	820.38																				
820.38																						
<b>B.</b> Full Name (Last, First, Middle Initial) Phelps County Bank Mailing Address 718 N Pine St City Rolla State MO Zip Code 65401 Purpose of Disbursement Payroll Taxes Candidate Name Phelps County Bank Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB503143-056 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> <b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>416.24</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	3		2	0	0	7	416.24
M	M	/	D	D	/	Y	Y	Y	Y													
1	1		1	3		2	0	0	7													
416.24																						
<b>C.</b> Full Name (Last, First, Middle Initial) Phelps County Bank Mailing Address 718 N Pine St City Rolla State MO Zip Code 65401 Purpose of Disbursement Payroll Taxes Candidate Name Phelps County Bank Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB503143-057 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> <b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>795.76</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	3		2	0	0	7	795.76
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		0	3		2	0	0	7													
795.76																						

**SUBTOTAL** of Disbursements This Page (optional) .....

2032.38

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 59 / 72

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Carnahan in Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Production Support Services	<b>Transaction ID:</b> SB503132-002 <b>Date of Disbursement</b>
Mailing Address 1450 S Vandeventer	<div> <div>10</div> <div>29</div> <div>2007</div> </div>
City State Zip Code St. Louis MO 63110	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Staging/sound for event	<div>1591.50</div>
Candidate Name Production Support Services	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Red Brick Management LLC	<b>Transaction ID:</b> SB131439-018 <b>Date of Disbursement</b>
Mailing Address 393 North Euclid Ave, Suite 300	<div> <div>10</div> <div>05</div> <div>2007</div> </div>
City State Zip Code St. Louis MO 63108	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Rent	<div>288.00</div>
Candidate Name Red Brick Management LLC	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Red Brick Management LLC	<b>Transaction ID:</b> SB131439-019 <b>Date of Disbursement</b>
Mailing Address 393 North Euclid Ave, Suite 300	<div> <div>11</div> <div>01</div> <div>2007</div> </div>
City State Zip Code St. Louis MO 63108	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Rent	<div>288.00</div>
Candidate Name Red Brick Management LLC	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**2167.50**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 60 / 72

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Carnahan in Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Red Brick Management LLC	<b>Transaction ID:</b> SB131439-020 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 7
Mailing Address 393 North Euclid Ave, Suite 300		Amount of Each Disbursement this Period
City St. Louis State MO Zip Code 63108		288.00
Purpose of Disbursement Rent		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name Red Brick Management LLC		001 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b>	Full Name (Last, First, Middle Initial) Ms. Megan E. Schwartz	<b>Transaction ID:</b> SB555275-003 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 7
Mailing Address 8200 Kammerer Ave.		Amount of Each Disbursement this Period
City St. Louis State MO Zip Code 63123		400.90
Purpose of Disbursement Salary		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name		001 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b>	Full Name (Last, First, Middle Initial) Shelter Insurance	<b>Transaction ID:</b> SB544042-002 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 7
Mailing Address 10054 Gravois Rd		Amount of Each Disbursement this Period
City St. Louis State MO Zip Code 63123		218.00
Purpose of Disbursement Insurance		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name Shelter Insurance		001 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		906.90
<b>TOTAL</b> This Period (last page this line number only) .....		

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 61 / 72

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Carnahan in Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Shelter Insurance</p> <p>Mailing Address 10054 Gravois Rd</p> <p>City St. Louis State MO Zip Code 63123</p> <p>Purpose of Disbursement Insurance</p> <p>Candidate Name Shelter Insurance</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB544042-003</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="40.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Show-Me Shop</p> <p>Mailing Address 10 S. Main</p> <p>City Ste. Genevieve State MO Zip Code 63670</p> <p>Purpose of Disbursement Catering</p> <p>Candidate Name Show-Me Shop</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB553529-002</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="489.85"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Southwest Airlines</p> <p>Mailing Address PO Box 36647</p> <p>City Dallas State TX Zip Code 75235</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name Southwest Airlines</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB404548-016</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="358.90"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**888.75**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 62 / 72

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Carnahan in Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Special Services, Inc	<b>Transaction ID:</b> SB527322-007 <b>Date of Disbursement</b>
Mailing Address 1309 Convention Pl	<div> <div>10</div> <div>05</div> <div>2007</div> </div>
City State Zip Code St. Louis MO 63103	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Travel	<div>1325.00</div>
Candidate Name Special Services, Inc	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Targeted Strategies	<b>Transaction ID:</b> SB220074-077 <b>Date of Disbursement</b>
Mailing Address 130 East Lockwood Road	<div> <div>10</div> <div>03</div> <div>2007</div> </div>
City State Zip Code St. Louis MO 63119	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Consulting Fee	<div>8374.39</div>
Candidate Name Targeted Strategies	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Targeted Strategies	<b>Transaction ID:</b> SB220074-078 <b>Date of Disbursement</b>
Mailing Address 130 East Lockwood Road	<div> <div>11</div> <div>10</div> <div>2007</div> </div>
City State Zip Code St. Louis MO 63119	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Fundraising Services	<div>6000.00</div>
Candidate Name Targeted Strategies	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**15699.39**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 63 / 72

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Carnahan in Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Targeted Strategies	<b>Transaction ID:</b> SB220074-079 <b>Date of Disbursement</b>
Mailing Address 130 East Lockwood Road	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 0 / 2 0 0 7</div> </div>
City State Zip Code St. Louis MO 63119	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Travel Reimbursement	<div> <div>1093.68</div> </div>
Candidate Name Targeted Strategies	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div> <div>002</div> <div>Category/Type</div> </div>
<b>B.</b> Full Name (Last, First, Middle Initial) Targeted Strategies	<b>Transaction ID:</b> SB220074-080 <b>Date of Disbursement</b>
Mailing Address 130 East Lockwood Road	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 1 / 2 0 0 7</div> </div>
City State Zip Code St. Louis MO 63119	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Fundraising Services	<div> <div>6000.00</div> </div>
Candidate Name Targeted Strategies	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div> <div>001</div> <div>Category/Type</div> </div>
<b>C.</b> Full Name (Last, First, Middle Initial) Targeted Strategies	<b>Transaction ID:</b> SB220074-081 <b>Date of Disbursement</b>
Mailing Address 130 East Lockwood Road	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 1 / 2 0 0 7</div> </div>
City State Zip Code St. Louis MO 63119	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Travel Reimbursement	<div> <div>985.99</div> </div>
Candidate Name Targeted Strategies	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div> <div>002</div> <div>Category/Type</div> </div>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**8079.67**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 64 / 72

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Carnahan in Congress

<b>A.</b> Full Name (Last, First, Middle Initial) The Inkspot Inc.	<b>Transaction ID:</b> SB537596-013 <b>Date of Disbursement</b>																				
Mailing Address 5755 Chippewa St.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	3		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	3		2	0	0	7												
City State Zip Code St. Louis MO 63109	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Printing	<table border="1"> <tr> <td colspan="10">399.58</td> </tr> </table>	399.58																			
399.58																					
Candidate Name The Inkspot Inc.	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) United Air	<b>Transaction ID:</b> SB553528-002 <b>Date of Disbursement</b>																				
Mailing Address 77 W. Wacker Dr.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	9		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	9		2	0	0	7												
City State Zip Code Chicago IL 60601	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Travel	<table border="1"> <tr> <td colspan="10">337.60</td> </tr> </table>	337.60																			
337.60																					
Candidate Name United Air	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) UPS	<b>Transaction ID:</b> SB511568-068 <b>Date of Disbursement</b>																				
Mailing Address PO Box 650580	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	1		2	0	0	7												
City State Zip Code Dallas TX 75265	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Delivery Service	<table border="1"> <tr> <td colspan="10">46.57</td> </tr> </table>	46.57																			
46.57																					
Candidate Name UPS	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional) .....

783.75

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 65 / 72

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Carnahan in Congress

<b>A.</b> Full Name (Last, First, Middle Initial) UPS Mailing Address PO Box 650580	<b>Transaction ID:</b> SB511568-069 <b>Date of Disbursement</b> <div> <div>10</div> <div>05</div> <div>2007</div> </div>
City Dallas State TX Zip Code 75265 Purpose of Disbursement Delivery Service Candidate Name UPS Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>3.57</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) UPS Mailing Address PO Box 650580 City Dallas State TX Zip Code 75265 Purpose of Disbursement Delivery Service Candidate Name UPS Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB511568-070 <b>Date of Disbursement</b> <div> <div>10</div> <div>29</div> <div>2007</div> </div> <b>Amount of Each Disbursement this Period</b> <div>67.04</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) UPS Mailing Address PO Box 650580 City Dallas State TX Zip Code 75265 Purpose of Disbursement Delivery Service Candidate Name UPS Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB511568-072 <b>Date of Disbursement</b> <div> <div>11</div> <div>28</div> <div>2007</div> </div> <b>Amount of Each Disbursement this Period</b> <div>61.61</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

**132.22**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 66 / 72

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Carnahan in Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Matthew S. Van Buren Mailing Address PO Box 1221	<b>Transaction ID:</b> SB515530-075 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	1		2	0	0	7	
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		0	1		2	0	0	7													
City Alcalde State NM Zip Code 87511 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>928.94</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	928.94																				
928.94																						
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Matthew S. Van Buren Mailing Address PO Box 1221 City Alcalde State NM Zip Code 87511 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB515530-076 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> <b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>928.94</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	5		2	0	0	7	928.94
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		1	5		2	0	0	7													
928.94																						
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Matthew S. Van Buren Mailing Address PO Box 1221 City Alcalde State NM Zip Code 87511 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB515530-077 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> <b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>928.94</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	1		2	0	0	7	928.94
M	M	/	D	D	/	Y	Y	Y	Y													
1	1		0	1		2	0	0	7													
928.94																						

**SUBTOTAL** of Disbursements This Page (optional) .....

2786.82

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 67 / 72

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Carnahan in Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Matthew S. Van Buren Mailing Address PO Box 1221	<b>Transaction ID:</b> SB515530-078 <b>Date of Disbursement</b> <div> <div>11</div> <div>15</div> <div>2007</div> </div>
City Alcalde State NM Zip Code 87511 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>928.93</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Matthew S. Van Buren Mailing Address PO Box 1221 City Alcalde State NM Zip Code 87511 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB515530-079 <b>Date of Disbursement</b> <div> <div>12</div> <div>01</div> <div>2007</div> </div> <b>Amount of Each Disbursement this Period</b> <div>928.94</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Matthew S. Van Buren Mailing Address PO Box 1221 City Alcalde State NM Zip Code 87511 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB515530-080 <b>Date of Disbursement</b> <div> <div>12</div> <div>15</div> <div>2007</div> </div> <b>Amount of Each Disbursement this Period</b> <div>928.94</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

**2786.81**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 68 / 72

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Carnahan in Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Verizon Mailing Address PO Box 660720	<b>Transaction ID:</b> SB527250-004 <b>Date of Disbursement</b> <div> <div>10</div> <div>01</div> <div>2007</div> </div>
City Dallas State TX Zip Code 75266 Purpose of Disbursement Telephone Service Candidate Name Verizon Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>231.34</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) Verizon Mailing Address PO Box 660720 City Dallas State TX Zip Code 75266 Purpose of Disbursement Telephone Service Candidate Name Verizon Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB527250-005 <b>Date of Disbursement</b> <div> <div>10</div> <div>29</div> <div>2007</div> </div> <b>Amount of Each Disbursement this Period</b> <div>207.97</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) Verizon Mailing Address PO Box 660720 City Dallas State TX Zip Code 75266 Purpose of Disbursement Telephone Service Candidate Name Verizon Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB527250-006 <b>Date of Disbursement</b> <div> <div>11</div> <div>19</div> <div>2007</div> </div> <b>Amount of Each Disbursement this Period</b> <div>208.63</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

**647.94**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 69 / 72

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Carnahan in Congress

A.

Full Name (Last, First, Middle Initial)

Verizon

Mailing Address PO Box 660720

City  
Dallas

State  
TX

Zip Code  
75266

Purpose of Disbursement  
Telephone Service

Candidate Name  
Verizon

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB527250-007

Date of Disbursement

12 / 17 / 2007

Amount of Each Disbursement this Period

207.94

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

207.94

TOTAL This Period (last page this line number only) .....

62429.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 70 / 72

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input checked="" type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Carnahan in Congress**A.**Full Name (Last, First, Middle Initial)  
Rep. John Russell Carnahan

Mailing Address 3150 Allen Ave

City State Zip Code  
St. Louis MO 63104Purpose of Disbursement  
Loan Payment

Candidate Name

009  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2004  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB121783-029

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	9		2	0	0	7

Amount of Each Disbursement this Period

1111.57

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**B.**Full Name (Last, First, Middle Initial)  
Rep. John Russell Carnahan

Mailing Address 3150 Allen Ave

City State Zip Code  
St. Louis MO 63104Purpose of Disbursement  
Loan Payment

Candidate Name

009  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2004  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB121783-031

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	5		2	0	0	7

Amount of Each Disbursement this Period

4000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**C.**Full Name (Last, First, Middle Initial)  
Rep. John Russell Carnahan

Mailing Address 3150 Allen Ave

City State Zip Code  
St. Louis MO 63104Purpose of Disbursement  
Loan Payment

Candidate Name

009  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2004  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB121783-032

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	7		2	0	0	7

Amount of Each Disbursement this Period

4000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

9111.57

TOTAL This Period (last page this line number only) .....

9111.57

**SCHEDULE C (FEC Form 3)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 71 / 72

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13bNAME OF COMMITTEE (In Full)  
Carnahan in Congress

Transaction ID: SC/10.1004

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Russ Carnahan - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 3150 Allen Ave

City St. Louis State MO ZIP Code 63104

Original Amount of Loan

49000.00

Cumulative Payment To Date

46611.57

Balance Outstanding at Close of This Period

2388.43

**TERMS**

Date Incurred

M M  
0 7D D  
2 3Y Y Y Y  
2 0 0 4

Date Due

on demand

Interest Rate

500.00 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

2388.43

**TOTALS** This Period (last page in this line only) ▶

2388.43

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 72 / 72

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
Carnahan in Congress

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
National City Bank

Nature of Debt (Purpose):  
Credit Card Payment

Mailing Address 230 N. Euclid Avenue

City	State	ZIP Code
St. Louis	MO	63108

Outstanding Balance Beginning This Period

0.00

Transaction ID: D503121-000

Amount Incurred This Period

2023.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2023.00

1) **SUBTOTALS** This Period This Page (optional)..... ▶

2023.00

2) **TOTALS** This Period (last page this line number only)..... ▶

2023.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

2388.43

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

4411.43